

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Restoration PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571588		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <b>Capitol Media Partners</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016		
Mailing Address 2468 S. Camino Real			Amount <span style="border: 1px solid black; padding: 2px;">500.00</span>		
City Palm Springs		State CA	Zip Code 92264		Transaction ID : SE.4665
Purpose of Expenditure Digital advertising (production cost)		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016	
Name of Federal Candidate Hillary Rodham Clinton			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">107166.66</span> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		
Full Name of Payee <b>Capitol Media Partners</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016		
Mailing Address 2468 S. Camino Real			Amount <span style="border: 1px solid black; padding: 2px;">10750.00</span>		
City Palm Springs		State CA	Zip Code 92264		Transaction ID : SE.4666
Purpose of Expenditure Digital advertising (placement cost)		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 19 / 2016	
Name of Federal Candidate Hillary Rodham Clinton			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">117916.66</span> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;">11250.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Sherry Gaskill</i>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 01 / 21 / 2016		

[Electronically Filed]

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Restoration PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00571588	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Communications Counsel, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 20 / 2016</b>		
Mailing Address <b>37 West Broad Street, Suite 325</b>			Amount <b>6666.66</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Transaction ID : <b>SE.4656</b>		
Purpose of Expenditure Television advertising (production cost)		Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>12 / 29 / 2015</b>		
Name of Federal Candidate <b>Hillary Rodham Clinton</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>DC</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>6666.66</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>Communications Counsel, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>01 / 20 / 2016</b>		
Mailing Address <b>37 West Broad Street, Suite 325</b>			Amount <b>100000.00</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Transaction ID : <b>SE.4659</b>		
Purpose of Expenditure Television advertising (placement)		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 14 / 2016</b>		
Name of Federal Candidate <b>Hillary Rodham Clinton</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>DC</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>106666.66</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>106666.66</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	<b>117916.66</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sherry Gaskill

[Electronically Filed]

Date

MM / DD / YYYY  
**01 / 21 / 2016**

Signature